| SCHEDOLE B (I LC I OHIII 3A) | | FOR LINE I | NUMBER: PAGE OF I |
|--|---|-------------------|--|
| TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only one) | |
| - | Detailed Summary Page | 21b | 22 X 23 24 25 26 30 30 30 30 30 30 30 30 30 30 30 30 30 |
| | | 27 | 28a 28b 28c 29 30b |
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| NAME OF COMMITTEE (In Full) | | | |
| TIBERI FOR CONGRESS | | | |
| Full Name (Last, First, Middle Initial) | | | Data of District |
| A. TIBERI FOR CONGRESS | | | Date of Disbursement |
| Mailing Address | | | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ |
| 2931 E DUBLIN-GRANVILLE ROAD | | | 0 8 2 6 2 0 1 6 |
| City State Zip Code | | | |
| COLUMBUS | OH 43231 | | |
| Purpose of Disbursement | 7 | | Amount of Each Disbursement this Period |
| CAMPAIGN DONATION Candidate Name | ; | | Section and the section of the secti |
| PAT TIBERI | | Category/ Type | 3 0 0 0 0 |
| Office Sought: X House Disbursen | | | |
| └ | Primary X General | | |
| Obia | Other (specify) ▼ | | |
| | | | |
| Full Name (Last, First, Middle Initial) B. | | | Date of Disbursement |
| | | | |
| Mailing Address | | | MICHAEL COLORS |
| | | | . a. umt - Cautes - Chaire Luctured |
| City State Zip Code | | | |
| Purpose of Disbursement | | | |
| Gardina Nova | | | Amount of Each Disbursement this Period |
| Candidate Name Category/ | | | । प्रकारिक का विकासीम्बलिंग्स्यक्षित्राचे वस्त्रीता वस्त्रीता वर्षा १ मा वर्षेत्रा स्त्री |
| Office Sought: House Disbursen | nent For: | Туре | da atamina tradicatina ta disatina fi ad |
| · | nent For: Primary General | | |
| . [_] | Other (specify) | | |
| State: District: | • | | |
| Full Name (Last, First, Middle Initial) | | | |
| C. (1) | | | Date of Disbursement |
| Mailing Address | | | MUMI / DED. / YEYEY |
| Mailing Address | | | llened lessed lenseum med . |
| City | State Zip Code | | |
| • | | | |
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| Office Sought: House Disbursen | nent For: | . , , , , , | <u> Carriere de Carrière Carrière, de La Carrière de </u> |
| Senate | Primary General | | |
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| SUBTOTAL of Disbursements This Page (optional) | | | |
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